

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MJ	55	11/17
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	10/10/55
Original	10/10/55
1	✓ ✓
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6	✓ ✓
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8	✓ ✓
9	✓ ✓ ✓
10	✓ ✓ ✓
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12	✓ ✓
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16	✓ ✓
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20	✓ ✓
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29	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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